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JAN 03 2008

## NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

(Please read the instructions before completing.)

COMMISSION  
ON ETHICS

## PERSONAL INFORMATION:

|   |   |
|---|---|
| NAME: <u>William E Roberts</u>            | LENGTH OF RESIDENCE IN NEVADA: <u>17 YRS</u>  |
| ADDRESS: <u>P.O. Box 6618</u>             |   |
| CITY, STATE, ZIP: <u>Pahrump NV 89041</u> | LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)): <u>5</u> |
| TELEPHONE: <u>(775) 209 3916</u>          | E-MAIL: <u>rob.roberts@nyek12.nv.us</u>   |

**SECTION A (Public Office):** List all public offices for which this financial disclosure statement is required [NRS 281A.620.1(g)] and check each box accordingly i.e. annual, candidate or appointment filing:

- **ANNUAL** all elected and appointed public officers (no later than Jan. 15 each year)
- **CANDIDATE** (no later than the 10<sup>th</sup> day after the last day to qualify as a candidate)
- **APPOINTMENT** to fill unexpired term of an elected or appointed public officer (within 30 days)

| Public Office                         | Elected or Appointed (E or A) | Annual Compensation | Term or Date Appointed | ANNUAL<br>NRS<br>281A.600.1(b)<br>281A.610.1(b) | CANDIDATE<br>NRS<br>281A.610.1(a) | APPOINTMENT<br>NRS<br>281A.600.1(a) |
|---------------------------------------|-------------------------------|---------------------|------------------------|---|-----------------------------------|-------------------------------------|
| Gov's Working Group Meth Use          | A                             | \$ <u>0</u>         | <u>2007</u>            | <input type="checkbox"/>                        | <input type="checkbox"/>          | <input checked="" type="checkbox"/> |
| Gov's Commission on Nuke Projects     | A                             | \$ <u>0</u>         | <u>2007</u>            | <input type="checkbox"/>                        | <input type="checkbox"/>          | <input checked="" type="checkbox"/> |
| Superintendent Nye County School Dist | A                             | \$ <u>149,000</u>   | <u>2002</u>            | <input type="checkbox"/>                        | <input type="checkbox"/>          | <input type="checkbox"/> HIRED      |

**SECTION B (Sources of Income):** List each source of your income (including any source listed in Section A), or that of any member of your household who is 18 years of age or older. [NRS 281A.620.1(b)]:

|                               | Self                                | Household Member         |
|-------------------------------|-------------------------------------|--------------------------|
| <u>Nye County School Dist</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <u>U.S. Army (Ret)</u>        | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|                               | <input type="checkbox"/>            | <input type="checkbox"/> |
|                               | <input type="checkbox"/>            | <input type="checkbox"/> |

**SECTION C (Real Property):** List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281A.620.1(c)]:

| Specific Location | Particular Use |
|-------------------|----------------|
|                   |                |
|                   |                |
|                   |                |
|                   |                |
|                   |                |
|                   |                |

**SECTION D (Creditors):** List each creditor to whom you or a member of your household owes \$5,000 or more [EXCEPT: (1) debt secured by mortgage or deed of trust on real property which is not required to be listed in Section C above; and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281A.620.1(d)]:

|       | Self                     | Household Member         |
|-------|--------------------------|--------------------------|
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |

**SECTION E (Gifts):** List the identity of donor and value of each gift of all gifts received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [EXCEPT: (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281A.620.1(e)]:

| Donor | Gift  | Value of Gift |
|-------|-------|---------------|
| _____ | _____ | \$ _____      |
| _____ | _____ | \$ _____      |
| _____ | _____ | \$ _____      |
| _____ | _____ | \$ _____      |
| _____ | _____ | \$ _____      |

**SECTION F (Business Entities):** List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281A.620.1(f)]:

|       | Self                     | Household Member         |
|-------|--------------------------|--------------------------|
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |

**THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.**

Date: JAN 3, 2008

Signature: \_\_\_\_\_

*Wm E. Roberts*

**FILE COMPLETED FORM WITH:**

Appointed Public Officers  
Nevada Commission on Ethics  
3476 Executive Pointe Way, Suite 10  
Carson City, Nevada 89706  
775.687.5469 • 775.687.1279 fax

Elected Public Officers and Candidates for Public Office  
Nevada Secretary of State, Elections Division  
101 North Carson Street, Suite 3  
Carson City, Nevada 89701  
775.684.5705 • 775.684.5718 fax